

PCT INTERNATIONAL APPLICATION TRANSMITTAL LETTER
REGARDING THE INTERNATIONAL APPLICATION OF
GENERAL ELECTRIC COMPANY

DATE 22 September 1997
SOCKET OR REFERENCE NUMBER
RD25877/24528

ENTITLED

Method For Dissolution Of Nitrogen-Rich Inclusions In Titanium And Titanium Alloys

Certification under 37 CFR 1.10 (if applicable)

EI 701 722 321 US

"Express Mail" mailing number

22 September 1997

Date of Deposit

I hereby certify that this application is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37CFR 1.10 on the date indicated above and is addressed to the Commissioner of Patents and Trademarks, Washington, D.C. 20231.

Constance M. Ferrara

(Type or printed name of person mailing application)

(Signature of person mailing application)

To the United States Receiving Office (RO/US):

Accompanying this transmittal letter is the above-identified International application including a completed Request form (PCT/RO/101). Please process the application according to the provisions of the Patent Cooperation Treaty.

The following requests are made of the RO/US

1. ☒ PREPARATION AND TRANSMITTAL OF CERTIFIED COPY OF PRIORITY DOCUMENTS - Please prepare and transmit to the International Bureau a certified copy of the United States origin priority documents identified in Box VI of the Request form (37 CFR 1.451).

To cover the cost of copy preparation and certification (37 CFR 1.19 (a) (3) and (b) (1)).

☐ a (check) (money order) in the amount of _____ is attached to this transmittal letter.

☒ the RO/US is hereby authorized to charge the following deposit account no.: 09-0470

The appropriate Search fee for the above-named Authority is indicated on the Fee Calculation Sheet (PCT/RO/101 Annex).

2. ☐ SUPPLEMENTAL SEARCH FEES (ONLY WHEN ISA/US CONDUCTS THE INTERNATIONAL SEARCH.) - Please charge any Supplemental Search fees that may be required by the United States International Searching Authority (ISA/US) to deposit account number: _____

I understand that this authorization is subject to my oral confirmation thereof in each instance and that it in no way limits my right to submit a protest against payment of the Supplemental Search fees, but is merely an administrative aid to assure that the ISA/US may timely complete the Search Report.

NOTE: SUPPLEMENTAL SEARCH FEES FOR ISA/EP ARE PAYABLE DIRECTLY TO THE EUROPEAN PATENT OFFICE.

3. ☒ DISCLOSURE INFORMATION - In order to assist in screening the accompanying International application for purposes of determining whether a license for foreign transmittal should and could be granted, the following information is supplied:

A. ☐ There is no prior filed application relating to this invention.

B. ☒ There is a prior application*, serial number 60/027,265 filed on 25 September 1996 which contains subject matter that is

1. ☒ substantially identical to that of the accompanying international application.

2. ☐ less than that of the accompanying International application. The additional subject matter of the International application appears on page(s) and line(s) _____

3. ☐ more than that of the accompanying International application.

C. ☐ Disclosure information cannot be covered by the language of Points 3A or 3B above due to the involvement of several prior applications or for other reasons. A separate sheet on which the disclosure information is explained is attached to this transmittal letter.

4. ☒ REQUEST FOR FOREIGN TRANSMITTAL LICENSE - According to the provisions of 35 U.S.C. 184 and 37 CFR 5.11, a license to transmit the accompanying International application to foreign agencies or international authorities is hereby requested.

* Priority is not claimed, unless all necessary information is listed in Box VI of the Request Form (PCT/RO/101)

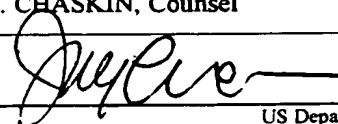
SIGNER IS THE

- ☐ APPLICANT
☐ COMMON REPRESENTATIVE
☒ ATTORNEY
REG NO. 24030

NAME OF SIGNER (TYPED)

Jay L. CHASKIN, Counsel

SIGNATURE





The undersigned requests that the present international application be processed according to the Patent Cooperation Treaty.

F Receiving Office use only

International Application No.

International Filing Date

Name of receiving Office and "PCT International Application"
Applicant's or agent's file reference
(if desired) (17 characters maximum) RD25877/24528

Box No. I TITLE OF INVENTION

Method For Dissolution Of Nitrogen-Rich Inclusions In Titanium And Titanium Alloys

Box No. II APPLICANT

Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country.)

GENERAL ELECTRIC COMPANY
a corporation of the State of New York
1 River Road
Schenectady, New York 12345
United States of America

☐ This person is also inventor

Telephone No.
203-373 -2867

Facsimile No.
203-373 -3991

Teleprinter No.

State (i.e. country) of nationality:
US

State (i.e. country) of residence:
US

This person is applicant all designated all designated States except the United States the States indicated in
for the purpose of: ☐ States ☒ the United States of America ☐ of America only ☐ the Supplemental Box

Box No. III FURTHER APPLICANT(S) AND/OR (FURTHER) INVENTOR(S)

Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country.)

BENZ, Mark Gilbert
11 Parkwood Drive
Burnt Hills, New York 12027
United States of America

This person is:

☐ applicant only

☒ applicant and inventor

☐ inventor only (If this check-box is marked, do not fill in below.)

State (i.e. country) of nationality:
US

State (i.e. country) of residence:
US

This person is applicant all designated all designated States except the United States the States indicated in
for the purpose of: ☐ States ☐ the United States of America ☒ of America only ☐ the Supplemental Box

☒ Further applicants and/or (further) inventors are indicated on a continuation sheet.

Box No. IV AGENT OR COMMON REPRESENTATIVE; OR ADDRESS FOR CORRESPONDENCE

The person identified below is hereby/has been appointed to act on behalf

of the applicant(s) before the competent International Authorities as: ☒ agent ☐ common representative

Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country.)

CHASKIN, Jay L.
GENERAL ELECTRIC COMPANY
3135 Easton Turnpike W3C
Fairfield, CT 06431
United States of America

Telephone No.
203-373 -2867

Facsimile No.
203-373 -3991

Teleprinter No.

☐ Mark this check-box where no agent or common representative is/has been appointed and the space above is used instead to indicate a special address to which correspondence should be sent.

Continuation of Box No. 1		OTHER APPLICANT(S) AND/OR (FURTHER) INVENTOR(S)	
<i>If none of the following sub-boxes is used, this sheet is not to be included in the request.</i>			
Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country.) BEWLAY, Bernard Patrick 2305 Balltown Road Schenectady, New York 12309 United States of America		This person is: <input type="checkbox"/> applicant only <input checked="" type="checkbox"/> applicant and inventor <input type="checkbox"/> inventor only (If this check-box is marked, do not fill in below.)	
State (i.e. country) of nationality: GB		State (i.e. country) of residence: US	
This person is applicant for the purpose of: <input type="checkbox"/> all designated States <input type="checkbox"/> all designated States except the United States of America <input checked="" type="checkbox"/> the United States of America only <input type="checkbox"/> the States indicated in the Supplemental Box			
Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country.) GIGLIOTTI, Jr., Michael Francis 41 Kile Drive Scotia, New York 12302 United States of America		This person is: <input type="checkbox"/> applicant only <input checked="" type="checkbox"/> applicant and inventor <input type="checkbox"/> inventor only (If this check-box is marked, do not fill in below.)	
State (i.e. country) of nationality: US		State (i.e. country) of residence: US	
This person is applicant for the purpose of: <input type="checkbox"/> all designated States <input type="checkbox"/> all designated States except the United States of America <input checked="" type="checkbox"/> the United States of America only <input type="checkbox"/> the States indicated in the Supplemental Box			
Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country.) CARTER, Jr., William Thomas 1949 Perth Road Galway, New York 12074 United States of America		This person is: <input type="checkbox"/> applicant only <input checked="" type="checkbox"/> applicant and inventor <input type="checkbox"/> inventor only (If this check-box is marked, do not fill in below.)	
State (i.e. country) of nationality: US		State (i.e. country) of residence: US	
This person is applicant for the purpose of: <input type="checkbox"/> all designated States <input type="checkbox"/> all designated States except the United States of America <input checked="" type="checkbox"/> the United States of America only <input type="checkbox"/> the States indicated in the Supplemental Box			
Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country.) KNUDSEN, Bruce Alan 238 Belfance Road Amsterdam, New York 12010 United States of America		This person is: <input type="checkbox"/> applicant only <input checked="" type="checkbox"/> applicant and inventor <input type="checkbox"/> inventor only (If this check-box is marked, do not fill in below.)	
State (i.e. country) of nationality: US		State (i.e. country) of residence: US	
This person is applicant for the purpose of: <input type="checkbox"/> all designated States <input type="checkbox"/> all designated States except the United States of America <input checked="" type="checkbox"/> the United States of America only <input type="checkbox"/> the States indicated in the Supplemental Box			

☒ Further applicants and/or (further) inventors are indicated on another continuation sheet.

Continuation of Box No. 1 OTHER APPLICANT(S) AND/OR (FURTHER) INVENTOR(S)	
<i>If none of the following sub-boxes is used, this sheet is not to be included in the request.</i>	
Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country.) MESCHTER, Peter Joel 2248 Berkely Avenue Schenectady, New York 12309 United States of America	This person is: <input type="checkbox"/> applicant only <input checked="" type="checkbox"/> applicant and inventor <input type="checkbox"/> inventor only (If this check-box is marked, do not fill in below.
State (i.e. country) of nationality: US	State (i.e. country) of residence: US
This person is applicant for the purpose of: <input type="checkbox"/> all designated States <input type="checkbox"/> all designated States except the United States <input checked="" type="checkbox"/> the United States of America <input type="checkbox"/> of America only <input type="checkbox"/> the States indicated in the Supplemental Box	
Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country.) ZABALA, Robert John 39 Terry Avenue Schenectady, New York 12303 United States of America	This person is: <input type="checkbox"/> applicant only <input checked="" type="checkbox"/> applicant and inventor <input type="checkbox"/> inventor only (If this check-box is marked, do not fill in below.
State (i.e. country) of nationality: US	State (i.e. country) of residence: US
This person is applicant for the purpose of: <input type="checkbox"/> all designated States <input type="checkbox"/> all designated States except the United States <input checked="" type="checkbox"/> the United States of America <input type="checkbox"/> of America only <input type="checkbox"/> the States indicated in the Supplemental Box	
Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country.) NIC, Joel Patrick 91C Hilltop Manor Clifton Park, New York 12065 United States of America	This person is: <input type="checkbox"/> applicant only <input checked="" type="checkbox"/> applicant and inventor <input type="checkbox"/> inventor only (If this check-box is marked, do not fill in below.
State (i.e. country) of nationality: US	State (i.e. country) of residence: US
This person is applicant for the purpose of: <input type="checkbox"/> all designated States <input type="checkbox"/> all designated States except the United States <input checked="" type="checkbox"/> the United States of America <input type="checkbox"/> of America only <input type="checkbox"/> the States indicated in the Supplemental Box	
Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country.) PEROCCHI, Lee Cranford 1220 Van Antwerp Road Schenectady, New York 12309 United States of America	This person is: <input type="checkbox"/> applicant only <input checked="" type="checkbox"/> applicant and inventor <input type="checkbox"/> inventor only (If this check-box is marked, do not fill in below.
State (i.e. country) of nationality: US	State (i.e. country) of residence: US
This person is applicant for the purpose of: <input type="checkbox"/> all designated States <input type="checkbox"/> all designated States except the United States <input checked="" type="checkbox"/> the United States of America <input type="checkbox"/> of America only <input type="checkbox"/> the States indicated in the Supplemental Box	
<input checked="" type="checkbox"/> Further applicants and/or (further) inventors are indicated on another continuation sheet.	

Continuation of Box No. 1		OTHER APPLICANT(S) AND/OR (FURTHER) INVENTOR(S)	
<i>If none of the following sub-boxes is used, this sheet is not to be included in the request.</i>			
Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country.) RADCHENKO, Vladimir Nikolayevich 30 Magaw Place, Apartment 3A New York, New York 10033 United States of America		This person is: <input type="checkbox"/> applicant only <input checked="" type="checkbox"/> applicant and inventor <input type="checkbox"/> inventor only (If this check-box is marked, do not fill in below.)	
State (i.e. country) of nationality: UA		State (i.e. country) of residence: US	
This person is applicant for the purpose of: <input type="checkbox"/> all designated States <input type="checkbox"/> all designated States except the United States <input checked="" type="checkbox"/> the United States of America <input type="checkbox"/> the States indicated in the Supplemental Box			
Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country.) RIABTSEV, Anatoly Danilovich Home 4, Flat 82 Geleznodorogny, Makeevka 339047 Ukraine		This person is: <input type="checkbox"/> applicant only <input checked="" type="checkbox"/> applicant and inventor <input type="checkbox"/> inventor only (If this check-box is marked, do not fill in below.)	
State (i.e. country) of nationality: UA		State (i.e. country) of residence: UA	
This person is applicant for the purpose of: <input type="checkbox"/> all designated States <input type="checkbox"/> all designated States except the United States <input checked="" type="checkbox"/> the United States of America <input type="checkbox"/> the States indicated in the Supplemental Box			
Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country.) TARLOV, Oleg Vladimirovich Home 11, Flat 2 Vilnysskay, Donetsk 340074 Ukraine		This person is: <input type="checkbox"/> applicant only <input checked="" type="checkbox"/> applicant and inventor <input type="checkbox"/> inventor only (If this check-box is marked, do not fill in below.)	
State (i.e. country) of nationality: UA		State (i.e. country) of residence: UA	
This person is applicant for the purpose of: <input type="checkbox"/> all designated States <input type="checkbox"/> all designated States except the United States <input checked="" type="checkbox"/> the United States of America <input type="checkbox"/> the States indicated in the Supplemental Box			
Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country.) (Empty)		This person is: <input type="checkbox"/> applicant only <input type="checkbox"/> applicant and inventor <input type="checkbox"/> inventor only (If this check-box is marked, do not fill in below.)	
State (i.e. country) of nationality:		State (i.e. country) of residence:	
This person is applicant for the purpose of: <input type="checkbox"/> all designated States <input type="checkbox"/> all designated States except the United States <input type="checkbox"/> the United States of America <input type="checkbox"/> the States indicated in the Supplemental Box			
<input type="checkbox"/> Further applicants and/or (further) inventors are indicated on another continuation sheet.			

Box V DESIGNATION OF STATES

The following designations are hereby made under Rule 4.9 (a) mark the applicable check-boxes; at least one must be marked):

Regional Patent

- ☐ **AP ARIPO Patent:** GH Ghana, KE Kenya, LS Lesotho, MW Malawi, SD Sudan, SZ Swaziland, UG Uganda, ZW Zimbabwe, and any other State which is a Contracting State of the Harare Protocol and of the PCT
- ☒ **EA Eurasian Patent:** AM Armenia, AZ Azerbaijan, BY Belarus, KG Kyrgystan, KZ Kazakstan, MD Republic of Moldova, RU Russian Federation, TJ Tajikistan, TM Turkmenistan, and any other State which is a Contracting State of the Eurasian Patent Convention and of the PCT.
- ☒ **EP EUROPEAN Patent:** AT Austria, BE Belgium, CH and LI Switzerland and Liechtenstein, DE Germany, DK Denmark, ES Spain, FI Finland, FR France, GB United Kingdom, GR Greece, IE Ireland, IT Italy, LU Luxembourg, MC Monaco, NL Netherlands, PT Portugal, SE Sweden, and any other State which is a Contracting State of the European Patent Convention and of the PCT.
- ☐ **OA OAPI Patent:** BF Burkina Faso, BJ Benin, CF Central African Republic, CG Congo, CI Côte d'Ivoire, CM Cameroon, GA Gabon, GN Guinea, ML Mali, MR Mauritania, NE Niger, SN Senegal, TD Chad, TG Togo, and any other State which is a member State of OAPI and a Contracting State of the PCT (if other kind of protection or treatment desired, specify on the dotted line).....

National Patent (if other kind of protection or treatment desired, specify on dotted line):

- | | |
|--|--|
| <input type="checkbox"/> AL Albania | <input type="checkbox"/> LV Latvia |
| <input type="checkbox"/> AM Armenia | <input type="checkbox"/> MD Republic of Moldova |
| <input type="checkbox"/> AT Austria | <input type="checkbox"/> MG Madagascar |
| <input type="checkbox"/> AU Australia | <input type="checkbox"/> MK The former Yugoslav Republic of Macedonia |
| <input type="checkbox"/> AZ Azerbaijan | <input type="checkbox"/> MN Mongolia |
| <input type="checkbox"/> BA Bosnia and Herzegovina | <input type="checkbox"/> MW Malawi |
| <input type="checkbox"/> BB Barbados | <input type="checkbox"/> MX Mexico |
| <input type="checkbox"/> BG Bulgaria | <input type="checkbox"/> NO Norway |
| <input type="checkbox"/> BR Brazil | <input type="checkbox"/> NZ New Zealand |
| <input type="checkbox"/> BY Belarus | <input type="checkbox"/> PL Poland |
| <input checked="" type="checkbox"/> CA Canada | <input type="checkbox"/> PT Portugal |
| <input type="checkbox"/> CH and LI Switzerland and Liechtenstein | <input type="checkbox"/> RO Romania |
| <input checked="" type="checkbox"/> CN China | <input type="checkbox"/> RU Russian Federation |
| <input type="checkbox"/> CU Cuba | <input type="checkbox"/> SD Sudan |
| <input type="checkbox"/> CZ Czech Republic | <input type="checkbox"/> SE Sweden |
| <input type="checkbox"/> DE Germany | <input type="checkbox"/> SG Singapore |
| <input type="checkbox"/> DK Denmark | <input type="checkbox"/> SI Slovenia |
| <input type="checkbox"/> EE Estonia | <input type="checkbox"/> SK Slovakia |
| <input type="checkbox"/> ES Spain | <input type="checkbox"/> TJ Tajikistan |
| <input type="checkbox"/> FI Finland | <input type="checkbox"/> TM Turkmenistan |
| <input type="checkbox"/> GB United Kingdom | <input type="checkbox"/> TR Turkey |
| <input type="checkbox"/> GE Georgia | <input type="checkbox"/> TT Trinidad and Tobago |
| <input type="checkbox"/> HU Hungary | <input checked="" type="checkbox"/> UA Ukraine |
| <input type="checkbox"/> IL Israel | <input type="checkbox"/> UG Uganda |
| <input type="checkbox"/> IS Iceland | <input checked="" type="checkbox"/> US United States of America |
| <input checked="" type="checkbox"/> JP Japan | <input type="checkbox"/> UZ Uzbekistan |
| <input type="checkbox"/> KE Kenya | <input type="checkbox"/> VN Viet Nam |
| <input type="checkbox"/> KG Kyrgyzstan | |
| <input type="checkbox"/> KP Democratic People's Republic of Korea | |
| <input checked="" type="checkbox"/> KR Republic of Korea | |
| <input type="checkbox"/> KZ Kazakstan | |
| <input type="checkbox"/> LC Saint Lucia | |
| <input type="checkbox"/> LK Sri Lanka | |
| <input type="checkbox"/> LR Liberia | |
| <input type="checkbox"/> LS Lesotho | |
| <input type="checkbox"/> LT Lithuania | |
| <input type="checkbox"/> LU Luxembourg | |

Check-boxes reserved for designating States (for the purpose of a national patent) which have become party to the PCT after issuance of this sheet

In addition to the designations made above, the applicant also makes under Rule 4.9(b) all designations which would be permitted under the PCT except the designations(s) of _____. The applicant declares that those additional designations are subject to confirmation and that any designation which is not confirmed before the expiration of 15 months from the priority date is to be regarded as withdrawn by the applicant at the expiration of that time limit. (Confirmation of a designation consists of the filing of a notice specifying that designation and the payment of the designation and confirmation fees. Confirmation must reach the receiving Office within the 15-month time limit.)

Supplemental Box If the Supplemental Box is not used, this sheet need not be included in the request.

Use this box in the following cases:

1. If, in any of the Boxes, the space is insufficient to furnish all the information:

In such case, write "Continuation of Box No. ____" [indicate the number of the Box] and furnish the information in the same manner as required according to the captions of the Box in which the space was insufficient;

particular:

(i) if more than two persons are involved as applicants and/or inventors and no "continuation sheet" is available:

in such case, write "Continuation of Box No. III" and indicate for each additional person the same type of information as required in Box No. III;

(ii) if, in Box No. II or in any of the sub-boxes of Box No. III, the indication "the States indicated in the Supplemental Box" is checked:

in such case, write "Continuation of Box No. II" or "Continuation of Box No. III" or "Continuation of Boxes No. II and No. III" (as the case may be), indicate the name of the inventor(s) and, next to (each) such name, the State(s) (and/or, where applicable, ARIPO, European or OAPI patent) for the purposes of which the named person is inventor,

(iii) if, in Box No. II or in any of the sub-boxes of Box No. III, the inventor or the inventor/applicant is not inventor for the purposes of all designated States or for the purposes of the United States of America:

in such case, write "Continuation of Box No. II" or "Continuation of Box No. III" or "Continuation of Boxes No. II and No. III" (as the case may be), indicate the name of the inventor(s) and, next to (each) such name, the State(s) (and/or, where applicable, ARIPO, European or OAPI patent) for the purposes of which the named person is inventor,

(iv) if, in addition to the agent(s) indicated in Box No. IV, there are further agents:

in such case, write "Continuation of Box No. IV" and indicate for each further agent the same type of information as required in Box No. IV;

(v) if, in Box No. V, the name of any State (or OAPI) is accompanied by the indication "patent of addition," or "certificate of addition," or if, in Box No. V, the name of the United States of America is accompanied by an indication "Continuation" or "Continuation-in-part":

in such case, write "Continuation of Box No. V" and the name of each State involved (or OAPI), and after the name of each such State (or OAPI), the number of the parent title or parent application and the date of grant of the parent title or filing of the parent application;

(vi) if there are more than three earlier applications whose priority is claimed:

in such case, write "continuation of Box No. VI" and indicate for each additional earlier application the same type of information as required in Box No. VI.

2. If the applicant claims, in respect of any designated Office, the benefits of provisions of the national law concerning non-prejudicial disclosures or exceptions to lack of novelty:

in such case, write "Statement Concerning Non-Prejudicial Disclosures or Exceptions to Lack of Novelty" and furnish that statement below.

Continuation of Box No. IV:

SNYDER, Bernard
General Electric Company
3135 Easton Turnpike W3C
Fairfield, Connecticut 06431
United States of America

Box No. VI PRIORITY CLAIM

Further priority

are indicated in the Supplemental Box ☐

The priority of the following earlier application(s) is hereby claimed:

Country (in which, or for which, the application was filed)	Filing Date (day/month/year)	Application No.	Office of filing (only for regional or international application)
item (1) US	25 SEPTEMBER 1996 (25.09.96)	60/027,265	
item (2)			
item (3)			

Mark the following check-box if the certified copy of the earlier application is to be issued by the Office which for the purposes of the present international application is receiving Office (a fee may be required):

☒ The receiving Office is hereby requested to transmit to the International

Bureau a certified copy of the earlier application(s) identified above as item(s) (1)

Box No. VII INTERNATIONAL SEARCHING AUTHORITY**Choice of International Searching Authority (ISA)** (if two or more International Searching Authorities are competent to carry out the international search, indicate the Authority chosen; the two-letter code may be used): **ISA/EP****Earlier search** Fill in where a search (international-type or other) by the International Searching Authority has already been carried out or requested and the Authority is now requested to base the international search, to the extent possible, on the results of that earlier search. Identify such search or request either by reference to the relevant application (or the translation thereof) or by reference to the search request:

Country (or regional Office):

Date (day/month/year):

Number:

Box No. VIII CHECK LIST

This international application contains the following number of sheets:

1. request : 7 sheets
2. description : 11 sheets
3. claims : 2 sheets
4. abstract : 1 sheets
5. drawings : 3 sheets
- : 24 sheets

TOTAL

This international application is accompanied by the item(s) marked below:

1. ☐ separate signed power of attorney
2. ☒ copy of general power of attorney
3. ☐ statement explaining lack of signature
4. ☐ priority document(s) identified in Box No. VI as item(s):
5. ☒ fee calculation sheet
6. ☐ separate indications concerning deposited microorganisms
7. ☐ nucleotide and/or amino acid sequence listing (diskette)
8. ☒ other (specify): **PTO-1382 Transm. Letter**

Figure No. 1 of the drawings (if any) should accompany the abstract when it is published.

Box No. IX SIGNATURE OF APPLICANT OR AGENT

Next to each signature, indicate the name of the person signing and the capacity in which the person signs (if such capacity is not obvious from reading the request).


 JAY L. CHASKIN, Counsel

For receiving Office use only

1. Date of actual receipt of the purported international application:	2. Drawings: <input type="checkbox"/> received: <input type="checkbox"/> not received:
3. Corrected date of actual receipt due to later but timely received papers or drawings completing the purported international application:	
4. Date of timely receipt of the required corrections under PCT Article 11(2):	
5. International Searching Authority specified by the applicant: ISA/	
6. <input type="checkbox"/> Transmittal of search copy delayed until search fee is paid	

For receiving Office use only

Date of receipt of the record copy
by the International Bureau:

PCT**FEE CALCULATION SHEET**

Annex to the Request

International Application No.

Applicant's or agent's
file reference **RD25877/24528**

Applicant

GENERAL ELECTRIC COMPANY**CALCULATION OF PRESCRIBED FEES**

1. TRANSMITTAL FEE 230 T

2. SEARCH FEE 1310 S

International search to be carried out by **ISA/(Eur. Pat. Off)**

(If two or more International Searching Authorities are competent in relation to the international application, indicate the name of the Authority which is chosen to carry out the international search.)

3. INTERNATIONAL FEE

Basic FeeThe international application contains 24 sheets.
first 30 sheets.....530 b₁0 x 10 =
remaining sheets additional amount0 b₂Add amounts entered at b₁ and b₂ and enter total at B

530 B

Designation FeesThe international application contains 8 designations.8 x 128 =
number of designation fees amount of designation fee
payable (maximum 11)

1024 D

Add amounts entered at B and D and enter total at I

1554 I

(Applicants from certain States are entitled to a reduction of 75% of the international fee. Where the applicant is (or all applicants are) so entitled, the total to be entered at I is 25% of the sum of the amounts entered at B and D.)

4. FEE FOR PRIORITY DOCUMENT

15 P

5. TOTAL FEES PAYABLE

Add amounts entered at T,S,I and P, and enter total in the TOTAL
box.....

3109

TOTAL

☐ The designation fees are not paid at this time.**MODE OF PAYMENT**

authorization to charge

☒ deposit account (see below)☐ bank draft☐ coupons☐ cheque☐ cash☐ other (specify)☐ postal money order☐ revenue stamps**DEPOSIT ACCOUNT AUTHORIZATION** (this mode of payment may not be available at all receiving Offices)The RO/US☒ is hereby authorized to charge the total fees indicated above to my deposit account.☒ is hereby authorized to charge any deficiency or credit any overpayment in the total fees indicated above to my deposit account.☒ is hereby authorized to charge the fee for preparation and transmittal of the priority document to the International Bureau of WIPO to my deposit account.

09-0470

22 SEPTEMBER 1997

Deposit Account Number


Date (day/month/year)

Signature *Jay L. Chaskin* **JAY L. CHASKIN, Counsel**

CERTIFICATE

I, Arthur M. King, an Attesting Secretary of the General Electric Company, a Corporation of New York, United States of America, do hereby certify that Board of Directors' Resolution No. 10855 dated April 26, 1988, authorizes the General Counsel to delegate to others in the Company the authority to execute instruments on behalf of the Company in patent, trademark and copyright matters. I do hereby certify that such delegation has been made by Benjamin W. Heineman, Jr., Senior Vice President, General Counsel and Secretary, in a written instrument dated May 17, 1988. I do hereby certify that the attached document is a true and exact copy of said instrument.

Witness my hand and the seal of said Corporation this 14th day of December 1989.



Attesting Secretary

BEST AVAILABLE COPY


DELEGATION OF AUTHORITY

Pursuant to the authority delegated to me by Paragraph (F) of the resolution relating to the Execution of Contracts and Other Instruments adopted by the Board of Directors on April 26, 1988 (Minute #10835), I hereby delegate:

1. To the General Patent Counsel, the authority to execute on behalf of the Company licenses, contracts, assignments, releases, court pleadings and other instruments relating to inventions and technology and to patent, trademark and copyright matters.

2. To the Associate General Patent Counsel, the Company's Trademark Counsel, the Manager-Washington Patent Operation, and the incumbent of any position within the Company which includes the designation "Counsel" or "Patent Counsel" in its title, each severally, the authority to execute on behalf of the Company petitions, powers of attorney, authorizations, verifications, nominations of representatives, declarations, and other instruments relating to proceedings in the Patent, Trademark Registration or Copyright Offices servicing any country or region of the world, or to related appeal proceedings, or relating to maintenance and defense of the resulting industrial property rights, assignments of rights to apply for and acquire patents and trademark registrations, evidence of such assignments, requests for the registration of patents as available for licensing, reports of inventions and petitions for waiver of patent rights to any department or agency of the United States Government and assignments, licenses and other instruments confirmatory of Government rights in patents and inventions.

Dated this 17th day of May, 1988.


Benjamin W. Reisman, Jr.
Senior Vice President -
General Counsel and Secretary

ATTEST:



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